

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|-------------------|----------|--------|----------|
| FEE DETERMINATION | D.B. | 70205 | 9-30-99 |
| I.P.E. CLASSIFIER | | 5 | 4-1-99 |
| FINALITY REVIEW | EVBS | 62793 | 04/07/00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|----------|
| 1 | ✓ | ✓ | 08/01/03 |
| 2 | ✓ | ✓ | 08/01/03 |
| 3 | ✓ | ✓ | 08/01/03 |
| 4 | ✓ | ✓ | 08/01/03 |
| 5 | ✓ | ✓ | 08/01/03 |
| 6 | ✓ | ✓ | 08/01/03 |
| 7 | ✓ | ✓ | 08/01/03 |
| 8 | ✓ | ✓ | 08/01/03 |
| 9 | ✓ | ✓ | 08/01/03 |
| 10 | ✓ | ✓ | 08/01/03 |
| 11 | ✓ | ✓ | 08/01/03 |
| 12 | ✓ | ✓ | 08/01/03 |
| 13 | ✓ | ✓ | 08/01/03 |
| 14 | ✓ | ✓ | 08/01/03 |
| 15 | ✓ | ✓ | 08/01/03 |
| 16 | ✓ | ✓ | 08/01/03 |
| 17 | ✓ | ✓ | 08/01/03 |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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Best Available Copy